**Amendments to the Claims**

This listing of claims will replace all prior versions, and listings, or claims in the application:

**Listing of Claims:**

Claims 1-24 (cancelled)

Claims 25-27 (not entered)

28. (currently amended) A method of ~~inhibiting~~ **increasing the inhibition of** cell proliferation in a human target cell population **when said cell population is contacted with a human type I IFN**, wherein said target cell population possesses functional interferon alpha receptor 2c (IFNAR2c) polypeptide chains, said method comprising the steps of:

(a) increasing **in vitro** the number of functional human IFNAR2c polypeptide chains on the surface of cells within said target cell population to produce modified target cells, wherein said modified target cells possess an increased number of said functional IFNAR2c polypeptide chains and

(b) contacting said modified target cells with a therapeutically effective amount of a human type I IFN.

29. (previously presented) A method according to claim 28, wherein the number of functional human IFNAR2c polypeptide chains on the surface of said modified target cells is increased by up-regulation of gene expression of a human IFNAR2c gene.

30. (currently amended) A method according to claim 28, wherein the human type I IFN is a type I α ~~e~~ -IFN, a type I β ~~R~~-IFN, a type I ω ~~w~~-IFN or a consensus type I IFN.

31. (previously presented) A method according to claim 28, wherein said target cell population is involved in a proliferative cell condition.

32. (previously presented) A method according to claim 31, wherein said proliferative cell condition is cancer.

33. (previously presented) A method according to claim 31, wherein said proliferative cell condition is restenosis.

34. (previously presented) A method according to claim 28, wherein the number of functional IFNAR2c polypeptide chains on the surface of said modified target cells is increased by introducing an exogenous gene encoding a human IFNAR2c polypeptide into said modified target cells.

35. (previously presented) A method according to claim 34, wherein said exogenous gene encoding a human type I IFNAR2c polypeptide is introduced into said modified target cells using a viral vector.

36. (previously presented) A method according to claim 35, wherein the viral vector is a retroviral or adenoviral vector.

37. (previously presented) A method according to claim 34, wherein said exogenous gene encoding a human type I IFNAR2c polypeptide is introduced into said modified target cells using electroporation.

38. (previously presented) A method according to claim 28, wherein contact with a human type I IFN results in at least a 5% increase in inhibition of cell proliferation of said target cell population.

39. (previously presented) A method according to claim 28, wherein contact with a human type I IFN results in at least a 10% increase in inhibition of cell proliferation of said target cell population.

40. (previously presented) A method according to claim 35, wherein said exogenous gene encoding said human type I IFNAR2c polypeptide and a gene encoding a human type I IFN are introduced into said modified target cells on the same viral vector.

41. (cancelled) A method according to claim 34, wherein said exogenous gene encoding said human IFNAR2c polypeptide is introduced into cells of said target cell population to produce said modified target cells *in vitro*.

42. (new) A method of increasing the inhibition of cell proliferation in a human target cell population when said cell population is contacted with a human type I IFN, wherein said target cell population possesses functional interferon alpha receptor 2c (IFNAR2c) polypeptide chains, said method comprising the steps of:

(a) using electroporation to introduce an exogenous gene encoding human IFNAR2c polypeptide into cells within said target cell population to form modified target cells, wherein said modified target cells possess an increased number of said functional IFNAR2c polypeptide chains on the surface of said cells and

(b) contacting said modified target cells with a therapeutically effective amount of a human type I IFN.